JUL - 2 1946

HEADQUARTERS
EUROPEAN THEATER OF OPERATIONS
UNITED STATES ARMY.
Office of the Chief Surgeon
APO 887

Ch Surg 703 x 701

20 March 1945

CIRCULAR LETTER NO. 24

Dental Reports and Returns - - - - - - - - Section I Medical Care of Liaison Personnel Attached to the US Army - - - - - - Section II

SECTION I. DENTAL REPORTS AND RETURNS

1. Rescission.

Paragraphs 12 and 13, Circular Letter No. 20, Off Ch Surg, "Preparation and Submission of Medical Department Reports and Records", 2 February 1944, are rescinded.

2. Report of Dental Service.

- a. Rendered by all units and general dispensaries where dental officers are assigned. Consolidated reports -- see paragraph 3.
- b. Frequency -- Monthly, at the end of each calendar month.
- c. Will Contain -- WD MD Form 57 filled in, in accordance with Special Instructions below after all MD Forms 57 as revised for the European Theater of Operations have been exhausted or in no case after 1 May 1945.

d. Special Instructions.

- (1) Paragraph 1. Enter station or command, Army
 Post Office number, major command the unit is attached or assigned to, and strength of the unit.
- (2) Paragraph 2. Enter month only unless period covered is less than one calendar month.
- (3) Paragraph 3. Headings:
 - (a) Military -- includes all personnel in the armed forces of the United Nations, regular and auxiliary.

- (b) Others -- divide the column and mark one column "P.W." which will include prisoners of war and internees. Mark the last column "Others" which will include all civilians.
- (c) Admissions and Sittings.
 - Record total of military personnel admitted for routine treatment as routine admissions for the month and record the total of military personnel admitted for relief of pain or other intolerable condition as emergency admissions. The same procedure is followed with "P.W.". and "Others" receiving treatment. A case may be admitted but once. If a case is not completed during one calendar month, it is not recorded as an admission for the following month. If a case is discontinued, interrupted, or postponed for an indefinite period and the patient later returns for further treatment, it may be recorded as a new admission at the discretion of the dental officer concerned, who will be governed by the elapsed time and circumstances of the case.
 - 2. Sittings given. Each visit of a patient to a dental officer for treatment is considered a sitting. Sitting for purpose of examination will be recorded.
- (4) Paragraph 4. Under the regular total of all Class I cases list in parentheses the number of these that are I-d.
- (5). Paragraph-5A.
 - (a) Assigned personnel will be entered first. The number of dental officers who were commissioned originally in the Regular Army, National Guard, and Reserve will be listed as such. The officers who have received their commissions since 7 December 1941 will be listed as AUS. Serial numbers will be entered immediately following the name.
 - (b) Attached personnel will be listed after the assigned personnel. Under the column headed "Component", the organization to which the

officer is assigned will be listed. Under column headed "Duty", the inclusive dates of duty at the organization to which attached will be listed. Example: Frank A. Miller, Captain, 40th Station Hospital, 2 to 20 March. Serial numbers not required.

(6) Summary.

- (a) Number of dental officers assigned. Give total assigned at the end of the month.
- (b) Number attached from other units. Give total attached during any period of the month.
- (c) Total days of duty of assigned and attached personnel is self-explanatory.
- (d) Type in under Potal Days of Duty a separate entry Total Days Sick and Leave. Give total days of sickness and leave of both assigned and attached personnel.

(7) Paragraph 6 and 7.

- (a) Divide the column marked "Others" and make similar entries as in paragraph 3b.
- (b) The standard terms for diagnoses as listed in AR 40-1010 will be used as a guide in proparing dental records and reports. It is not intended that the standard list should be rigidly adhered to but, as far as practicable, it will be substantially followed.
- (c) Certain diagnoses will be used for certain treatments as follows:
 - 1. Caries and Defective Fillings are diagnoses to be used only for permanent fillings. For teeth treatment or extractions, use appropriate diagnoses such as Pulpitis or Abscess, Periapical.
 - 2. After Calculus, Removal of, enter only those cases where removal of calculus has been completed. If two, three, or more sittings are required to complete the removal of calculus in a given case,

it will be entered as one operation only. Credit will be taken for sittings.

- 3. The total number of full dentures inserted will be balanced by diagnoses Mandible or Maxillae Edentulous.
- 4. The total number of teeth replaced by bridges and partial dentures will be listed under diagnosis of Tooth, Missing. Do not enter teeth replaced by full dentures. The dental officer who delivers or inserts the denture, bridge or repair will take credit on the monthly report.
- 5. Pulp, Devitalization of, is the diagnosis for pulp extirpation.
- 6. Tooth, Pulpless, is the diagnosis for Root Canal Filling.
- 7. Diagnoses calling for treatment such as gingivitis, cellulitis, etc., will be entered one time only for each case.

 Enter as many treatments as given.
- 8. Diagnosis Eye Missing will be used with treatment Acrylic Eye Inserted.
- 9. Fracture, Reduction of, will be used only at the first unit where the fracture was first treated. The diagnosis will be "Fracture, (bone specified) new". All other installations will use the diagnosis of "Fracture, (bone specified), old", and treatment will be listed as "Post Operative Treatment".
- 10. Oxyphosphate fillings will be picked up under Tooth Treatment only with no diagnosis.
- (8) Paragraph 8. General Remarks.
 - (a) An explanation of total days of leave or sick in quarters or hospital.
 - (b) If an assigned officer is on detached service away from his parent organization, his

name, period covered, and organization to which attached will be entered.

- (c) Other pertinent dental information, problems or recommendations such as decorations, inadequacy of supplies, or personnel shortages.
- (d) Give the approximate number of patients treated from other commands -- in the case of hospitals this would be out-patient service only.
- e. Time of submission -- Monthly, before the 5th of the month following the close of the period. A negative report is required.
 - f. Classification -- Secret.
 - g. Copies and Channels.
 - (1) Field Force Units. Prepared in duplicate by the Dental Surgeons of all units under the jurisdiction of divisions. The original is forwarded to the division dental surgeon with the copy retained for the unit's files. The division dental surgeon will consolidate the reports of all division units. The consolidated reports of the divisions will be prepared in triplicate. The original and one copy will be forwarded to the Army Dental Surgeon, the triplicate filed. The dental surgeons of all units under Corps or Army (except divisions) will prepare the report in duplicate, forwarding the original to the Army Dental Surgeon and retaining the duplicate for the unit's file.
 - (2) Separate Commands. As directed by higher headquarters.
 - (3) Air Force Units. As directed by higher head-quarters.
 - (4) Communications Zone. Prepared in triplicate except hospitals under hospital centers who will prepare in quadruplicate. One copy is retained for unit files with the original and the other copies submitted through technical channels.
 - (5) Directives in Force. AR 40-1010.

3. Consolidated Reports of Dental Service.

- a. Rendered by dental surgeons of divisions and higher headquarters of Field Forces, Air Forces, Separate Commands and Base Sections.
- b. Frequency -- Monthly, at the end of each calendar month.
- c. Will Contain -- WD MD Form 57 completely filled in, consolidated from reports of units, dispensaries, and attached units not rendering separate reports in accordance with special instructions below, after all MD Forms 57 as revised for the European Theater of Operations have been exhausted or in no case after 1 May 1945. See also paragraph 2, preceding.
 - d. Special Instructions.
 - (1) In addition to instructions in paragraph 2, the report will list all officers separately, by organization, giving the following information:
 - Name -- Rank -- Serial Number -- Component -- Duties Performed

 Extra sheets can be used.
 - (2) All officers, newly arrived or transferred, will be listed under paragraph 8, giving date of arrival and assignment or transfer.
 - (3) Minor errors in reports will be corrected by the consolidating officer with a note to the officer in error to eliminate repetition of the mistake. Reports with gross errors will be returned for correction and resubmission.
 - e. Classification -- Socret.
- f. Time of Submission -- Monthly consolidations prepared by dental surgeons of intermediate commands will be submitted as directed by higher commands. Final consolidations by dental surgeons of Field Forces, Air Forces, Separate Commands, and Base Sections, will be submitted to the Office of the Chief Surgeon, ETOUSA, APO 837, on or before the twelfth (12th) of each month.
 - g. Copies and Channels.
 - (1) Intermediate headquarters will submit copies as directed by higher headquarters.

- (2) Dental surgeons of major commands, separate commands and Base Sections will submit one copy of the consolidated report.
 - (a) Reports submitted by the Army Dental Surgeon will be accompanied by the original report of each division.
 - (b) Reports submitted by Base Section dental surgeons will be accompanied by the original report of each unit.
- h. Directives in Force. AR 40-1010.

SECTION II. MEDICAL CARE OF LIAISON PERSONNEL ATTACHED TO THE US ARMY

- 1. Under existing theater policies, allied military personnel assigned or attached to US Army units or headquarters by official orders will be accorded exactly the same privileges as US military personnel relative to medical attention.
- 2. Allied liaison personnel, on discharge from hospital, are entitled to clothing replacement in those cases where their own clothing is irreclaimable.

By order of the Chief Surgeon:

H. W. DOAN, a Colonel, Medical Corps, Executive Officer.

